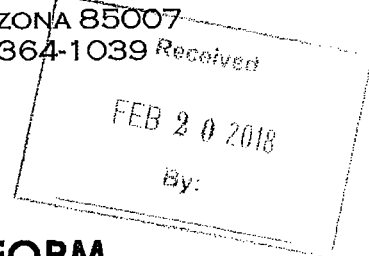


ARIZONA STATE VETERINARY MEDICAL EXAMINING BOARD

1740 W. ADAMS ST., SUITE 4600, PHOENIX, ARIZONA 85007

PHONE (602) 364-1PET (1738) FAX (602) 364-1039

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COMPLAINT INVESTIGATION FORM

If there is an issue with more than one veterinarian please file a separate Complaint Investigation Form for each veterinarian

PLEASE PRINT OR TYPE

FOR OFFICE USE ONLY

Date Received: Feb. 20, 2018

Case Number: 18-77

A. THIS COMPLAINT IS FILED AGAINST THE FOLLOWING:

Name of Veterinarian/CVT: Joseph Mancino

Premise Name: Chino Valley Animal Hospital

Premise Address: 3601 N. US Highway 89

City: Chino Valley State: AZ Zip Code: 86323

Telephone: (928) 636-4382

B. INFORMATION REGARDING THE INDIVIDUAL FILING COMPLAINT*:

Name: Yvonne Lowther

Address:

City: State: Zip Code:

Home Telephone: Cell Telephone:

*STATE LAW REQUIRES WE HAVE TO DISCLOSE YOUR NAME UNLESS WE CAN SHOW THAT DISCLOSURE WILL RESULT IN SUBSTANTIAL HARM TO YOU, SOMEONE ELSE OR THE PUBLIC PER A.R.S. § 41-1010. IF YOU HAVE REASON TO BELIEVE THAT SUBSTANTIAL HARM WILL RESULT IN DISCLOSURE OF YOUR NAME PLEASE PROVIDE COPIES OF RESTRAINING ORDERS OR OTHER DOCUMENTATION.

C. PATIENT INFORMATION (1):

Name: Missy Lowther
Breed/Species: Toy Fox Terrier
Age: 6 years Sex: Female Color: Tan/White

PATIENT INFORMATION (2):

Name: _____
Breed/Species: _____
Age: _____ Sex: _____ Color: _____

D. VETERINARIANS WHO HAVE PROVIDED CARE TO THIS PET FOR THIS ISSUE:

Please provide the name, address and phone number for each veterinarian.
Dr. McCollum, also in CVAH

E. WITNESS INFORMATION:

Please provide the name, address and phone number of each witness that has direct knowledge regarding this case.

Colby Lowther



Attestation of Person Requesting Investigation

By signing this form, I declare that the information contained herein is true and accurate to the best of my knowledge. Further, I authorize the release of any and all medical records or information necessary to complete the investigation of this case.

Signature: Colby Lowther

Date: 2/13/2018

F. ALLEGATIONS and/or CONCERNS:

Please provide all information that you feel is relevant to the complaint. This portion must be either typewritten or clearly printed in ink.

Please see attached 3 pages.

Following is an account of events that led to the death of my Toy Fox Terrier, Missy. I am filing this complaint against three veterinarians. At the end I address what my specific issue with each is.

12/7/2017 I noticed Missy was sensitive on her upper right side when I brushed her teeth. I called Chino Valley Animal Hospital (CVAH) to make an appointment to have it looked at.

12/8/2017 Colby (my husband) and I took Missy in for an exam and Dr. Mancino determined she had an abscess and would need the tooth extracted. He said he could get that done, Monday, 12/11. We expressed our concern about anesthesia and didn't want to put her under, but Dr. Mancino said they would take an x-ray on Monday morning when we brought her in to make sure it needed to be extracted. We agreed to have it done if it couldn't be avoided, and he recommended we also have her teeth cleaned while we were at it. We agreed to make the appointment and would decide how to proceed based on the x ray results. We reminded him of her allergies and reactions to vaccines and he assured us they would do a blood panel prior to the procedure to make sure everything was ok with her before they proceeded. He sent us home with antibiotics for her to start on and we made the appointment to bring her in on 12/11.

12/11/2017 Colby and I dropped Missy off and handed her over to a tech named Kassandra. We went home and waited for a call either telling us to come pick her up because she didn't need her tooth pulled, or she did need the tooth pulled and discuss our options. Instead I received a call from Dr. McCullom telling me there had been a "tragic event" with Missy and her heart had stopped while under anesthesia. I don't know how much time went by while we were all screaming and crying in disbelief, but when I picked the phone back up to speak with her, she explained that when she turned Missy over to clean the other side that her heart had stopped. She assured me that all her levels in her bloodwork were normal and she didn't understand why this happened. I told her this was why we didn't want to have her anesthetized, and she insisted that it was a legitimate extraction. She also informed me that the last time this happened to her was 5 years ago. I wasn't interested in her excuses, and my family was falling apart before my eyes from the news while I was still on the phone with her, so I just asked if we could go pick her up. I hung up and we somehow got in our truck and headed in to pick her up. When we showed up at the clinic, the girls at the front desk were unaware of what had happened and why we were there. We sat in the reception area and cried while waiting for quite a while. Then the tech we had handed Missy off to earlier that morning, Kassandra, came out and asked us to go out to the parking lot while we wait for her to bring Missy out to us. We then stood in the parking lot crying for a while until Kassandra brought Missy out in a box. She gave me a pat on the back, and went back inside. I don't need to explain how the rest of our day went. Just know that the crying that started when we received the news didn't start to lighten up for over two weeks.

12/12/2017 After the most tragic day in my life, I woke up to an email from CVAH thanking us for letting them treat Missy and to give them feedback on our visit. I couldn't believe it. I responded with a very emotional "How dare you" response. Later that morning I received a call from Dr. Kahan apologizing for what happened with Missy. He said he spoke with a tech that told him all her bloodwork levels were normal, so he didn't understand what happened. He shared a personal story about one of his dogs choking to death to try and empathize with me. I was rather offended that he only spoke with a tech about the incident, and not Dr. McCullom herself, but was in no mood to discuss much

of anything with him. I finished up our conversation to get off the phone because I just didn't care about anything he had to say. My heart was too broken to talk on the phone with anyone.

Over the next couple of days of sorrow, my husband and I felt like CVAH was trying to cover up something since everyone insisted everything with Missy was totally normal and this is just an unexplained anomaly that just happens. I decided to get a copy of Missy's file to see for ourselves if what they are telling us is the truth.

12/18/2017 I walked in to CVAH and requested a copy of all of our dogs files. The lady at the front desk, Lynn, said she would have to ask for permission for that. She took my information and said they would call when the copies were ready.

12/19/2017 CVAH called and said my file copies were ready. Colby drove me in immediately to pick them up. As soon as I opened Missy's file, I noticed there were no notes in her file from our meeting with Dr. Mancino indicating that she was supposed to get an x ray to determine if her tooth needed to be extracted, and they were supposed to call us to discuss further action. How was Dr. McCullom supposed to know this unless they discussed it verbally and there is no record of it in the file. I also didn't get a copy of the xray, so I don't even know if they did one. Then I proceeded to look at her blood panel, and a few of her levels were high. Why weren't we called to discuss this? Then there is the fact she was given an injection for anesthesia instead of gas. We were not aware that CVAH uses an injection for anesthesia. All of our previous experiences with our dogs being anesthetized have been with gas. Dr. Mancino assured us the anesthesia they use was safe for toy breeds when we were having our discussion concerning our reluctance to have her anesthetized unless it was necessary. Did he know Dr. McCullom was going to use an unsafe anesthesia for Missy? I have since called around to other veterinarian hospitals and haven't found another veterinarian that uses anything but gas anesthesia on toy breeds because it is the safest. So what happened that gave Dr. McCullom the impression that our dog wasn't a toy breed and that it was ok to use such a drug that is known to be unsafe for toy breeds? Was she even aware that our Missy is a pure breed Toy Fox Terrier. Colby and I bring up this fact every time we meet with a new doctor that doesn't know our dogs because they are constantly confusing them with chihuahuas. If we were made aware they were going to switch to another veterinarian, we would have met with her to make sure she knew everything we told Dr. Mancino.

1/23/2018 After speaking with an attorney about how to proceed in doing something about this completely avoidable tragedy, I called CVAH to get their insurance information. The girl on the phone, Courtney, was very courteous to me until she knew what I was calling for. Then she was very short with me, took my info and said "the lady that has that info will call you back".

1/25/2018 Arbitrice, Dr. Kahan's wife, called me to give me the AVMA insurance info and explained that the paperwork has been filed and that AVMA does not speak to the client. Arbitrice stated that she is the person I need to deal with now because she handles the paperwork side of the hospital. We discussed Missy's death and she said that she hadn't had a chance to review Missy's file yet, so she didn't know why this happened to Missy. I told her my issue with the lack of communication with Dr. Mancino and Dr. McCullom and not being contacted about the x ray results or the high levels in the blood panel. She didn't seem to know anything about that. I discussed that there are items missing from the files like x rays and previous blood work. She promised me a complete copy of

everything and would send it out for me to review immediately. Then I brought up the treatment we received from the staff that day and how impersonal and insensitive they were with us when we went to pick up Missy's body. She actually insulted me by stating that she knew for a fact that everyone in the hospital felt as bad as we did that day. (Let me just say on a side note that none of the individuals I have dealt with at CVAH so far have any idea of how to handle people who have lost their loved ones!) She couldn't have insulted me any worse at that point, so the conversation ended pretty quickly after that. I have to admit, I couldn't really discuss my problem with Dr. Kahan's clinic as a whole since she is the wife of the owner. Also, the complete files that she promised me have still not been received.

2/6/2018 Called AVMA and found out Arbitrator is correct, they do not speak to clients, only doctors. I don't understand how this insurance does any good when the clients aren't allowed to file claims explaining what happened to their pets. This needs to change.

It has taken me over two months just to hold my composure enough to get this all down on paper and file this paperwork. We miss our Missy deeply every day. I can't begin to express how our lives have changed since this tragedy. Colby and I do not have human children, we have toy fox terrier babies. Every one we have owned has been very special, but Missy was "the one". Losing her at the age of 6 in her prime is the worst thing that has ever happened to all of us. The health of our two elderly dogs has declined as a result of their depression from losing their pack leader. The devastating loss in our family is just the beginning of this story. We have been treated very poorly by CVAH and are being treated like it isn't a big deal what happened, we're just another number to them. There is not a price that can be put on our beloved baby, and we understand pets are treated as property in the eyes of the law, but we feel CVAH needs to be held accountable for their negligence in recording vital information that resulted in the death of our priceless Missy. Their staff should also be required to train on how to deal with grieving pet parents. Nobody deserves to be treated the way we were treated in the aftermath by their staff. They claim to be a state of the art facility, but they are not! The shady record system they have has me questioning whether they should even be allowed to stay open. We have talked to others that have been treated badly by them, and one person who has had a dog die under anesthesia as well. It's time someone did something about what is really going on at CVAH.

Dr. Mancino needs to be held accountable for not recording information that Dr. McCullom should have been given, and not being forthcoming that he was not going to be the veterinarian performing the procedure.

Dr. McCullom needs to be held accountable for not using a safe method of anesthesia for our toy breed dog. It is unacceptable that she uses such an unsafe method for any tiny dog. This needs to stop ASAP. She also lied to me when she said Missy's bloodwork was normal. It wasn't!

Dr. Kahan needs to be held accountable for everything wrong that is going on in his clinic. This was not an accident, it was CVAH negligence that resulted in Missy's death. He also lied when he told me Missy's levels were all normal. The lying needs to stop!

18-77

February 27, 2018

On December 8, 2017, Yvonne Lowther presented a 6 year old toy fox terrier named Missy after noticing sensitivity while attempting to brush Missy's teeth. Despite the sensitivity, Missy continued to eat and drink. Mrs. Lowther discussed this history with my technician Alisha Craig. I entered the room and introduced myself to the Lowthers. Mrs. Lowther restated the history to me. I proceeded to do a physical exam which was very straight forward. The only abnormalities I found involved the teeth. Being a small dog, I had a limited view of her mouth. I was able to determine she had a heavy build up of tartar on both upper carnassial teeth with the left side being worse than the right side. I suspected the left carnassial might need to be extracted but without radiographs there was no way to be sure. I stated this to the Lowthers. I recommended a dentistry where radiographs would be done on all the teeth to determine if any extractions were necessary. After extractions, the dentistry would be completed with scaling and polishing.

I pointed to the dental chart that hangs on the wall in the exam rooms. It states the items included in a dentistry such as pre-anesthetic bloodwork, intravenous catheter, dental radiographs, scaling, polishing and post dental medications and that these items are in the estimate. I encouraged the Lowthers to ask me any questions relating to the procedure. Mrs. Lowther was very concerned about anesthetic risks as well as reactions and sensitivities to medications. As I do with all clients, I explained there are always risks involving anesthesia but the protocol used at Chino Valley Animal Hospital had a very successful track record. This discussion was routine and uneventful and I knew it would be reviewed again in the anesthesia release form.

Since I am a relief veterinarian and my schedule is variable, I always make it a point to tell clients that I will not be the veterinarian doing the procedure or follow up unless they request it. In fact I always ask if they have a veterinarian preference amongst the doctors at the hospital and they should note this when they schedule the appointment. Mrs. Lowther said it was not necessary for me to do the dentistry. I did not note this in the record as I knew it would be stated at the time of scheduling which doctor would be doing the dentistry, and failing that, definitely at the time of admittance.

That was the last contact with Missy and the Lowthers.

Dr. Joseph Mancino

DOUGLAS A. DUCEY
- GOVERNOR -



VICTORIA WHITMORE
- EXECUTIVE DIRECTOR -

ARIZONA STATE VETERINARY MEDICAL EXAMINING BOARD

1740 W. ADAMS STREET, STE. 4600, PHOENIX, ARIZONA 85007
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INVESTIGATIVE COMMITTEE REPORT

TO: Arizona State Veterinary Medical Examining Board

FROM: PM Investigative Committee: Donald Noah, D.V.M. – Chair - **Absent**
Amrit Rai, D.V.M.
Adam Almaraz - Acting Chair
Christine Butkiewicz, D.V.M.
Tamara Murphy

STAFF PRESENT: Tracy A. Riendeau, CVT - Investigations
Victoria Whitmore, Executive Director
Sunita Krishna, Assistant Attorney General

RE: Case: 18-77
Complainant(s): Yvonne Lowther
Respondent(s): Joseph Mancino, DVM (License: 6504)

SUMMARY:

Complaint Received at Board Office: 2/20/18
Committee Discussion: 6/5/18
Board IIR: 8/15/18

APPLICABLE STATUTES AND RULES:

Laws as Amended July 2014
(Salmon); Rules as Revised September
2013 (Yellow)

On December 8, 2017, "Missy," a 6-year-old female Toy Fox Terrier was presented to Dr. Mancino for an oral evaluation. A dental was recommended. Complainant was under the impression that dental radiographs were going to be performed before she approved the dental with extraction.

On December 11, 2017, the dog was presented to Dr. McCollum for a dental procedure. During the procedure, after the left upper carnassial was extracted, the dog arrested. CPR was unsuccessful and the dog passed away.

Complainant contends Respondent was negligent in the care of the dog.

Complainant was noticed and appeared.

Respondent was noticed and appeared telephonically. Counsel, David Stoll, appeared.

The Committee reviewed medical records, testimony, and other documentation as described below:

- Complainant(s) narrative: Yvonne Lowther
- Respondent(s) narrative/medical record: Joseph Mancino, DVM
- Witness(es) narrative: Chino Valley Animal Hospital Staff

PROPOSED 'FINDINGS of FACT':

1. On December 8, 2017, the dog was presented to Dr. Mancino for an oral evaluation. Complainant was concerned the dog had an abscessed tooth due to the mouth being painful when brushing the teeth. Upon exam, the dog had a weight = 10.2 pounds, a temperature = 99.8 degrees, a heart rate = 100bpm, a respiration rate = 40rpm. Dr. Mancino noted that the dog had heavy plaque and needed a dental. The upper left carnassial tooth would likely require extraction.

2. Dr. Mancino stated in his narrative that he advised Complainant that the dog would likely need the left carnassial tooth extracted but without radiographs there was no way to be sure. He recommended a dentistry where radiographs would be taken on all teeth to determine if any extractions were necessary. He pointed to the dental chart on the wall in the exam room which states dentistry includes, pre-surgical blood work, IV catheter, dental radiographs, scaling, polishing and post-dental medications – all of which were on the estimate. Complainant expressed concern about anesthetic risks as well as reactions and sensitivities to medications. Dr. Mancino explained that there are risks involving anesthesia but the premise anesthesia protocol has been successful.

3. Dr. Mancino further stated that he is a relief veterinarian and he advised Complainant that he would not be the doctor performing the dental or follow up unless it was requested. Complainant told him that it was not necessary for him to do the dentistry. The dog was discharged with Clindadrops 20mL, 25mg/mL; give 2mLs orally every 24 hours until gone.

4. On December 11, 2017, the dog was presented to Dr. McCollum for a dental procedure. Technical staff member, Ms. Knight, had Complainant sign the estimate and surgical release form. She discussed what would take place and if there were any abnormalities in the blood work to keep them from proceeding, Complainant would be called.

5. Blood was collected and the following abnormalities were noted:

RBC	9.14	5.65 – 8.87
HCT	62.4	37.3 – 61.7
HGB	21.7	13.1 – 20.5
NEUTS	13.11	2.95 – 11.64

6. An IV catheter was placed and Lactated Ringers Solution was started. The dog was administered MaDTK 0.05mL IV (recipe in medical record), intubated and placed on isoflurane. The dog was also administered carprofen 50mg/mL, 0.4cc SQ. Dr. McCollum extracted tooth 208, the left upper carnassial tooth. The dog was being rotated to the opposite side when she went into cardiac arrest. CPR was immediately initiated including cardiac compressions, manually assisted ventilation, and dopram 1mL and epinephrine 0.5mL were administered IV. The dog did not respond and CPR was ceased.

7. Dental radiographs were not taken.

8. Dr. McCollum contacted Complainant to advise her of what transpired and extended her condolences. Later that day, Complainant picked up the dog's remains.

9. On December 12, 2017, Dr. Kahan, the responsible veterinarian for the premise called Complainant to express his condolences. In the conversation, Dr. Kahan reported that the blood values were normal and understood that unexpected deaths were difficult.

10. According to Complainant, she expressed concerns with anesthesia and did not want to put the dog under. Dr. Mancino explained that they would take an x-ray on Monday morning when they brought the dog in to make sure the tooth needed to be extracted. Complainant agreed to have the tooth extracted if it could not be avoided and have the dog's teeth cleaned at the same time. They agreed to make the appointment and would decide on how to proceed based on the radiograph result.

11. After Complainant dropped the dog off, she was expecting to get a call to either tell her to come back and pick up the dog because the tooth did not need extracted or the tooth needed to be removed and options needed to be discussed.

12. According to Ms. Craig, technical staff member, Dr. Mancino did not tell Complainant that dental radiographs would be taken before the dog was anesthetized nor did he state that Complainant would be called after dental radiographs were taken.

13. Complainant expressed concern that Dr. Mancino did not document in the medical record that radiographs were to be performed prior to anesthesia and he was not forthcoming about not being the veterinarian performing the procedure.

14. Additionally, Complainant was concerned that Dr. McCollum did not use a safe anesthesia on the dog, a toy breed, and was not truthful about blood work results. She also felt that Dr. Kahan was dishonest about the blood results being normal.

COMMITTEE DISCUSSION:

The Committee discussed that there were communication issues; it was clear Complainant did not understand what was going to happen on the day the dental occurred.

The Committee explained that to perform dental radiographs a general anesthetic is required and the anesthesia administered to the dog was appropriate. An induction anesthetic was administered first, then the dog was intubated and gas anesthesia was administered.

The treatment and surgical authorization forms were signed by Complainant's husband. However, Complainant was under the impression that she was going to be called before the extraction was going to take place. She thought radiographs were going to be performed to ensure an extraction was necessary and she would be called to discuss what the next step would be.

The Committee agreed that there were communication issues but did not think the outcome would have changed. The tooth needed to be extracted. It is not a requirement to document communications in the medical record, Complainant's husband signed the authorization form to perform a dental with extraction, therefore the procedure was performed.

COMMITTEE'S PROPOSED CONCLUSIONS of LAW:

The Committee concluded that no violations of the *Veterinary Practice Act* occurred.

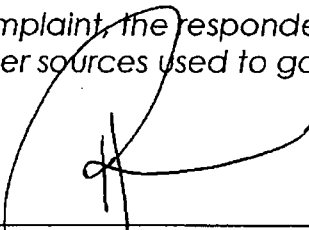
COMMITTEE'S RECOMMENDED DISPOSITION:

Motion: It was moved and seconded the Board:

Dismiss this issue with no violation.

Vote: The motion was approved with a vote of 4 to 0.

The information contained in this report was obtained from the case file, which includes the complaint, the respondent's response, any consulting veterinarian or witness input, and any other sources used to gather information for the investigation.



Tracy A. Riendeau, CVT
Investigative Division